· \		PART B	- FEE(S) T	RANSMITTAL		At>	
Complete and sould this form, together with applicable			ee(s), to: <u>Mai</u> or <u>Fa</u>	Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000			
INSTRUCTIONS: This for appropriate. A further coindicated unless to rected maintenance fee notifies.	orm' should be used for tran rrespondence including the below directed otherwise	smitting the ISSU Patent, advance ord in Block 1, by (a)		_	equired). Blocks 1 through 4 s s will be mailed to the current ess; and/or (b) indicating a separate	hould be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDEN	CE ADDRESS (Note: Legibly mark-up	with any corrections or	use Block I)	Note: A certificate Fee(s) Transmittal. papers. Each additi	of mailing can only be used for This certificate cannot be used to onal paper, such as an assignment cate of mailing or transmission.	or domestic mailings of the	
PHILIPS INTELLECTUAL PROPERTY & STANDARDS P.O. BOX 3001 BRIARCLIFF MANOR, NY 10510				I hereby certify that States Postal Service addressed to the M	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.		
			EDNA	CHAPA	(Depositor's name)		
				do	Chapo	(Signature)	
				4	130/04	(Date)	
APPLICATION NO.	FILING DATE	I	FIRST NAMED IN	IVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/056,369 01/17/2002			Dirk Willem Harberts		NL 010031	3931	
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE T	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330		\$300	\$1630	06/17/2004	
					¬	00/17/2004	
		ART UNI					
SANTIAGO, MARICELI 2879 313-412000							
1. Change of correspondenc CFR 1.363). ☐ Change of correspond Address form PTO/SB/1 ☐ "Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required.	Correspondence	names of up agents OR, a firm (having agent) and th attorneys or a	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Unless been previously submitte (A) NAME OF ASSIGN KONINF	PRESIDENCE DATA TO Be an assignee is identified below to the USPTO or is being stated to the USPTO or is being stated by the U	low, no assignee da submitted under sep IPS	ata will appear of arate cover. Cordinate cover. Cordinate Cordinate Cover. Cordinate Cover. Cordinate Cover. Cove	n the patent. Inclusion of inpletion of this form is N (CITY and STATE OR C	•	gnment.	
4a. The following fee(s) are	enclosed:	4b.	Payment of Fee				
Sussue Fee							
Publication Fee Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-13-10 (enclose an extra copy of this form).							
Director for Patents is reque	sted to apply the Issue Fee ar				d issue fee to the application ide		
other than the applicant; interest as shown by the re This collection of informa obtain or retain a benefit application. Confidentiality estimated to take 12 minu completed application for case. Any comments on suggestions for reducing the Patent and Trademark (22313-1450. DO NOT S.	d Publication Fee (if require a registered attorney or age cords of the United States Partion is required by 37 CFR by the public which is to fig y is governed by 35 U.S.C. I tes to complete, including gem to the USPTO. Time will the amount of time your this burden, should be sent to Office, U.S. Department of EEND FEES OR COMPLE for Patents, Alexandria, Virg.	ent; or the assigne- tent and Trademark 1.311. The inform le (and by the US) 22 and 37 CFR 1.1- thering, preparing, 1 vary depending to equire to complete o the Chief Inform of Commerce, Al TED FORMS TO	ation is required PTO to process) 4. This collection and submitting upon the individe	05/07/2004 5 1 to an n is the the that the the that the the the that the the that the the the the the the the the the th	SLUANG2 00000004 141270 1330.00 DA 300.00 DA	10056369	

TRANSMIT THIS FORM WITH FEE(S)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.